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| Chapter you are filing under: |                                       |                                       |
|-------------------------------|---------------------------------------|---------------------------------------|
| ☐ Chapter 7                   |                                       |                                       |
| ☐ Chapter 11                  |                                       |                                       |
| ☐ Chapter 12                  |                                       |                                       |
| ■ Chapter 13                  |                                       | Check if this an amended filing       |
|                               | ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 | ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself   |  |   |   |
|-----|--|--|---|---|
|     |  | About Debtor 1:                          |   | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name   |  |   |   |
|     | Write the name that is on  | Jaron                                    |   |   |
|     | your government-issued picture identification (for example, your driver's  | First name                               |   | First name                                    |
|     | license or passport).  | Middle name                              |   | Middle name                                   |
|     | Bring your picture   | Henyard                                  |   |   |
|     | identification to your meeting with the trustee.   | Last name and Suffix (Sr., Jr., II, III) | _ | Last name and Suffix (Sr., Jr., II, III)      |
|     |  |  |   |   |
| 2.  | All other names you have used in the last 8 years  | •  |   |   |
|     | Include your married or maiden names.  |  |   |   |
| 3.  | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-6027                              |   |   |

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Debtor 1 Jaron Henyard

Case number (if known)

|    |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
|----|---|---|--|
| 4. | Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years | ■ I have not used any business name or EINs.  Business name(s)  | ☐ I have not used any business name or EINs.  Business name(s)   |
|    | doing business as names   | Eddinose Hame(e)  | Business name(s)   |
|    |   | EINs  | EINs   |
| 5. | Where you live  | 61 S Arbor Trail  | If Debtor 2 lives at a different address:  |
|    |   | Park Forest, IL 60466  Number, Street, City, State & ZIP Code   | Number, Street, City, State & ZIP Code   |
|    |   | Cook  | Traines, erest, erry, erate a zir esate  |
|    |   | County  | County   |
|    |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |   | 14409 Dobson<br>Dolton, IL 60419  |  |
|    |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| 6. | Why you are choosing this district to file for  | Check one:  | Check one:   |
|    | bankruptcy  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|    |   | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|    |   |   |  |

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Case number (if known) Debtor 1 Jaron Henyard

| ar  | t 2: Tell the Court About   | Your I | Bankruptcy Ca                                       | se   |   |   |         |
|-----|---|--------|---|--|---|---|---------|
| 7.  | The chapter of the Bankruptcy Code you are  |        |   |  | of each, see Notice Required by page 1 and check the appropriate      | 11 U.S.C. § 342(b) for Individuals Filing for Bankrupt  | су      |
|     | choosing to file under  |        | Chapter 7   |  |   |   |         |
|     |   |        | Chapter 11  |  |   |   |         |
|     |   |        | Chapter 12  |  |   |   |         |
|     |   |        | Chapter 13  |  |   |   |         |
| 3.  | How you will pay the fee  | •      | about how yo  | u may pay. Typ<br>attorney is subr                       | pically, if you are paying the fee yo                                 | with the clerk's office in your local court for more dourself, you may pay with cash, cashier's check, or malf, your attorney may pay with a credit card or check   | oney    |
|     |   |        |   |  |   | n, sign and attach the Application for Individuals to I   | Pay     |
|     |   |        | I request that<br>but is not requ<br>applies to you | t my fee be wa<br>uired to, waive y<br>ur family size an | your fee, and may do so only if yond you are unable to pay the fee in | only if you are filing for Chapter 7. By law, a judge our income is less than 150% of the official poverty lire installments). If you choose this option, you must fil ial Form 103B) and file it with your petition. | ne that |
|     |   |        | the Application                                     | iri to nave trie C                                       | Snapter 7 Filing Fee Walved (Onic                                     | iai Form 1036) and lile it with your petition.  |         |
| 9.  | Have you filed for bankruptcy within the  | ■ N    |   |  |   |   |         |
|     | last 8 years?   | ПΥ     |   |  |   |   |         |
|     |   |        | District  |  | When  | Case number   |         |
|     |   |        | District  |  | When  | Case number   |         |
|     |   |        | District  |  | When  | Case number   |         |
| 10. | Are any bankruptcy cases pending or being   | ■ N    | lo  |  |   |   |         |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ΠY     | es.   |  |   |   |         |
|     |   |        | Debtor  |  |   | Relationship to you   |         |
|     |   |        | District  |  | When  | Case number, if known   |         |
|     |   |        | Debtor  |  |   | Relationship to you   |         |
|     |   |        | District  |  | When  | Case number, if known   |         |
| 11. | Do you rent your residence?   |        | lo. Go to li  | ne 12.   |   |   |         |
|     | residence?  | ■ Y    | es. Has yo  | ur landlord obta   | ained an eviction judgment agains                                     | t you and do you want to stay in your residence?  |         |
|     |   |        |   | No. Go to line   | 12.   |   |         |
|     |   |        | _   | Yes. Fill out <i>Ini</i> bankruptcy pet                  |   | ludgment Against You (Form 101A) and file it with th  | nis     |

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Debtor 1 Jaron Henyard Case number (if known)

| Part | Report About Any Bu   | sinesses               | You Own  | as a Sole Proprietor  |  |  |
|------|---|------------------------|--|---|--|--|
| 12.  | Are you a sole proprietor of any full- or part-time business?   | ■ No.                  | Go to  | Part 4.   |  |  |
|      |   | ☐ Yes.                 | Name   | e and location of business  |  |  |
|      | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                        | Name   | e of business, if any   |  |  |
|      | If you have more than one sole proprietorship, use a separate sheet and attach  |                        | Numb   | per, Street, City, State & ZIP Code   |  |  |
|      | it to this petition.  |                        | Check  | k the appropriate box to describe your business:  |  |  |
|      |   |                        |  | Health Care Business (as defined in 11 U.S.C. § 101(27A))   |  |  |
|      |   |                        |  | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))   |  |  |
|      |   |                        |  | Stockbroker (as defined in 11 U.S.C. § 101(53A))  |  |  |
|      |   |                        |  | Commodity Broker (as defined in 11 U.S.C. § 101(6))   |  |  |
|      |   |                        |  | None of the above   |  |  |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | deadlines<br>operation | are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set uses. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, sons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the .S.C. 1116(1)(B). |   |  |  |
|      | For a definition of small   | No.                    | I am n   | not filing under Chapter 11.  |  |  |
|      | business debtor, see 11 U.S.C. § 101(51D).  | □ No.                  | I am fi<br>Code.   | iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |  |  |
|      |   | ☐ Yes.                 | I am fi  | iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |  |  |
| Part | : 4: Report if You Own or   | Have Any               | Hazardo  | ous Property or Any Property That Needs Immediate Attention   |  |  |
| 14.  | Do you own or have any  | ■ No.                  |  |   |  |  |
|      | property that poses or is alleged to pose a threat of imminent and  | Yes.                   | What is  | the hazard?   |  |  |
|      | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?  |                        |  | diate attention is why is it needed?  |  |  |
|      | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |                        | Where is   | s the property?  Number, Street, City, State & Zip Code   |  |  |
|      |   |                        |  | · · · · · · · · · · · · · · · · · · ·   |  |  |

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Debtor 1 Jaron Henyard

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Jaron Henyard Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **25,001-50,000** you estimate that you **5001-10,000 5**0,001-100,000 50-99 owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jaron Henyard Signature of Debtor 2 Jaron Henyard Signature of Debtor 1 Executed on October 12, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

|                         | F Lentner Attorney for Debtor | Date        | _   | October 12, 2016<br>MM / DD / YYYY |
|-------------------------|-------------------------------|-------------|-----|------------------------------------|
| Joseph F                | Lentner                       |             |     |                                    |
|                         | & Desai, LLC                  |             |     |                                    |
| 670 W Hull<br>Suite 202 | obard                         |             |     |                                    |
| Chicago, I              | L 60654                       |             |     |                                    |
|                         | City, State & ZIP Code        |             |     |                                    |
| Contact phone           | 312-666-7882                  | Email addre | ess | kc@chicagobankruptcyattorney.com   |
| 6291735                 |                               |             |     |                                    |
| Bar number & S          | tate                          |             |     |                                    |

|                          | DUGIIIIGII               | Fau <del>c</del> 8 01 30                                     |
|--------------------------|--------------------------|--|
| mation to identify your  | case:                    |  |
| Jaron Henyard            |                          |  |
| First Name               | Middle Name              | Last Name  |
|                          |                          |  |
| First Name               | Middle Name              | Last Name  |
| ankruptcy Court for the: | NORTHERN DISTRICT OF     | ILLINOIS   |
|                          |                          |  |
|                          | Jaron Henyard First Name | Jaron Henyard First Name Middle Name  First Name Middle Name |

☐ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t 1: Summarize Your Assets   |              |                          |
|-----|--|--------------|--------------------------|
|     |  | Your as      | ssets<br>of what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$           | 0.00                     |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$           | 12,275.00                |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$           | 12,275.00                |
| Par | t 2: Summarize Your Liabilities  |              |                          |
|     |  |              | abilities<br>t you owe   |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 9,834.00                 |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$           | 2,300.00                 |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$           | 13,357.00                |
|     | Your total liabilities   | \$           | 25,491.00                |
| Par | t 3: Summarize Your Income and Expenses  |              |                          |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$           | 2,678.52                 |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$           | 2,353.00                 |
| Par | 4: Answer These Questions for Administrative and Statistical Records   |              |                          |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other sch | nedules.                 |
| _   | ■ Yes  |              |                          |
| 7.  | What kind of debt do you have?   |              |                          |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for   | a personal,  | family, or               |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |    | 5 740 00 |
|----|--|----|----------|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              | \$ | 5,712.08 |
|    |  | -  |          |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total | l claim  |
|--|-------|----------|
| From Part 4 on Schedule E/F, copy the following:   |       |          |
| 9a. Domestic support obligations (Copy line 6a.)   | \$_   | 0.00     |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$    | 2,300.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_   | 0.00     |
| 9d. Student loans. (Copy line 6f.)   | \$_   | 6,670.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$    | 0.00     |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$_  | 0.00     |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$    | 8,970.00 |

|                                       |  |   | Document P   | age 10 of 50   |   |  |
|---------------------------------------|--|---|--|--|---|--|
| -III IN                               | this info  | rmation to identify your ca   |  | aue to or so   |   |  |
| Debto                                 |  |   | · ·  |  |   |  |
| Jebioi                                | 1  | Jaron Henyard First Name  | Middle Name La   | st Name  |   |  |
| Debto                                 | 2  |   |  |  |   |  |
| Spouse                                | , if filing)   | First Name  | Middle Name La   | st Name  |   |  |
| Jnited                                | States B   | ankruptcy Court for the:  | ORTHERN DISTRICT OF ILLINOI  | S  |   |  |
| _                                     |  | _   |  |  |   | _  |
| Case r                                | number   |   |  |  |   | ☐ Check if this is an amended filing   |
|                                       |  |   |  |  |   | amended filing   |
|                                       |  |   |  |  |   |  |
| Offic                                 | <u>cial Fo</u>   | orm 106A/B  |  |  |   |  |
| Sch                                   | edu  | le A/B: Prope   | ertv   |  |   | 12/15  |
|                                       |  |   | tems. List an asset only once. If an a   | sset fits in more than one                                 | e category, list the asset in   |  |
| nink it 1                             | fits best.   | Be as complete and accurate   | as possible. If two married people are   | e filing together, both are                                | e equally responsible for su  | pplying correct  |
|                                       | tion. If mo<br>everv aue   |   | separate sheet to this form. On the to   | p of any additional pages                                  | s, write your name and case   | e number (if known).   |
|                                       | •  |   |  |  |   |  |
| Part 1:                               | Describe   | e Each Residence, Building, I   | and, or Other Real Estate You Own o  | r Have an Interest In                                      |   |  |
| Do y                                  | ou own or  | have any legal or equitable in  | nterest in any residence, building, lan  | d, or similar property?                                    |   |  |
|                                       |  |   |  |  |   |  |
|                                       | o. Go to Pa  |   |  |  |   |  |
| _                                     |  | in the property?  |  |  |   |  |
| _                                     | es. Where  | is the property?  |  |  |   |  |
| □ Ye                                  | •  | , ,   |  |  |   |  |
| Part 2: Do you comeon                 | Describe<br>own, lea   | e Your Vehicles<br>ase, or have legal or equit  | able interest in any vehicles, whe also report it on Schedule G: Executy vehicles, motorcycles   |  |   | chicles you own that   |
| Part 2: Oo you omeon                  | Describe<br>own, leader else dra<br>s, vans, t   | e Your Vehicles  ase, or have legal or equitrives. If you lease a vehicle,  | also report it on Schedule G: Exec   |  |   | chicles you own that   |
| Part 2: Do you omeon Cars             | Describe<br>own, lead<br>ne else dr<br>s, vans, t  | e Your Vehicles  ase, or have legal or equitrives. If you lease a vehicle,  | also report it on Schedule G: Exec   | utory Contracts and Un                                     | Do not deduct secured cla   | aims or exemptions. Put  |
| Part 2: Do you omeon Cars N Y 3.1     | Describe<br>own, lea<br>ne else dr<br>s, vans, t   | e Your Vehicles  ase, or have legal or equitives. If you lease a vehicle, rucks, tractors, sport utili  | also report it on <i>Schedule G: Executy</i> vehicles, motorcycles  Who has an interest in the pr  | utory Contracts and Un                                     | expired Leases.   | aims or exemptions. Put<br>d claims on <i>Schedule D:</i>  |
| Part 2: Do you omeon Cars N Y 3.1     | Describe<br>own, leader else drawns, vans, to<br>oes   | e Your Vehicles  ase, or have legal or equitrives. If you lease a vehicle, trucks, tractors, sport utili  | also report it on <i>Schedule G: Executy</i> vehicles, motorcycles   | utory Contracts and Un                                     | Do not deduct secured club the amount of any secure Creditors Who Have Clair  | aims or exemptions. Put<br>d claims on Schedule D:<br>ms Secured by Property.  |
| Part 2: Do you omeon Cars N Y 3.1     | Describe<br>own, leader else dra<br>s, vans, to<br>es<br>Make:<br>Model:<br>Year:  | e Your Vehicles  ase, or have legal or equitrives. If you lease a vehicle, trucks, tractors, sport utilitropy  Ford  Escape                             | also report it on Schedule G: Executy vehicles, motorcycles  Who has an interest in the pr Debtor 1 only Debtor 2 only   | utory Contracts and Un                                     | Do not deduct secured cluthe amount of any secure   | aims or exemptions. Put<br>d claims on <i>Schedule D</i> :   |
| Part 2: Do you omeon Cars N Y 3.1     | Describe<br>own, leader else dra<br>s, vans, to<br>es<br>Make:<br>Model:<br>Year:  | e Your Vehicles  ase, or have legal or equitrives. If you lease a vehicle, trucks, tractors, sport utilitrives.  Ford  Escape  2003  ate mileage: 17000 | who has an interest in the pr  Debtor 1 only  Debtor 2 only  | utory Contracts and Un                                     | Do not deduct secured cluber amount of any secure Creditors Who Have Claim  Current value of the  | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the  |
| Part 2: Do you omeon Cars N Y 3.1     | Describe own, lea ne else dr s, vans, t o es Make: Model: Year: Approxima  | e Your Vehicles  ase, or have legal or equitrives. If you lease a vehicle, trucks, tractors, sport utilitrives.  Ford  Escape  2003  ate mileage: 17000 | who has an interest in the pr Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a   | utory Contracts and Un operty? Check one                   | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property?   | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?   |
| Part 2: Do you omeon  Cars N Y 3.1    | Describe own, lea ne else dr s, vans, t o es Make: Model: Year: Approxima  | e Your Vehicles  ase, or have legal or equitrives. If you lease a vehicle, trucks, tractors, sport utilitrives.  Ford  Escape  2003  ate mileage: 17000 | who has an interest in the pr Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only  | utory Contracts and Un operty? Check one                   | Do not deduct secured cluber amount of any secure Creditors Who Have Claim  Current value of the  | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the  |
| Part 2: Do you come or  Cars  N Y 3.1 | Describe own, lea ne else dr s, vans, t o es Make: Model: Year: Approxima  | e Your Vehicles  ase, or have legal or equitrives. If you lease a vehicle, trucks, tractors, sport utilitrives.  Ford  Escape  2003  ate mileage: 17000 | who has an interest in the pr Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a   | utory Contracts and Un operty? Check one                   | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property?   | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?   |
| Part 2: Do you omeon Cars N Y 3.1     | Describe<br>own, leader else drawns, to<br>oes<br>Make:<br>Model:<br>Year:<br>Approximation  | e Your Vehicles  ase, or have legal or equitrives. If you lease a vehicle, trucks, tractors, sport utilitrives.  Ford  Escape  2003  ate mileage: 17000 | who has an interest in the pr Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is communit (see instructions)  | operty? Check one and another y property                   | Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the entire property? \$3,275.00   | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$3,275.00   |
| Part 2: Do you omeon Car: N Y 3.1     | Describe own, leader else dro s, vans, to oes Make: Model: Year: Approxima Other info  | Ford Escape 2003 ate mileage: 17000 Ford  | who has an interest in the pr Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is communit (see instructions)  Who has an interest in the pr   | operty? Check one and another y property                   | Do not deduct secured cluthe amount of any secure Creditors Who Have Clair Current value of the entire property?  \$3,275.00  Do not deduct secured cluthe amount of any secure   | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$3,275.00   |
| Part 2: Do you omeon Car: N Y 3.1     | Describe own, leader else dr s, vans, t o es Make: Model: Year: Approxima Other info   | Ford Escape 2003 ate mileage: 17000 Ford Mustang  | who has an interest in the pr Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is communit (see instructions)  Who has an interest in the pr Debtor 1 only   | operty? Check one and another y property                   | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property?  \$3,275.00  Do not deduct secured class amount of any secure Creditors Who Have Claim Creditors Who Have Claim Creditors Who Have Claim Care Communication Communicati | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$3,275.00  aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  |
| Part 2: Do you omeon Car: N Y 3.1     | Describe own, leader else drome else drome, vans, too es Make: Model: Year: Approxima Other inform Make: Model: Year:  | Ford Escape 2003 ate mileage: 17000 Ford  | who has an interest in the pr Debtor 1 only Debtor 2 only At least one of the debtors a Check if this is communit (see instructions)  Who has an interest in the pr Debtor 1 and Debtor 2 only At least one of the debtors a Debtor 1 only Debtor 2 only   | operty? Check one and another y property                   | Do not deduct secured cluthe amount of any secure Creditors Who Have Clair Current value of the entire property?  \$3,275.00  Do not deduct secured cluthe amount of any secure   | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$3,275.00   |
| Part 2: Do you omeon Car: N Y 3.1     | Describe own, leader else drome else drome, vans, too es Make: Model: Year: Approxima Other inform Make: Model: Year:  | Ford Escape 2003 ate mileage: Ford Mustang 2011 ate mileage: 10600  | who has an interest in the pr Debtor 1 only Debtor 2 only At least one of the debtors a Check if this is communit (see instructions)  Who has an interest in the pr Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Debtor 1 only Debtor 2 only   | operty? Check one and another y property operty? Check one | Do not deduct secured clithe amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$3,275.00  Do not deduct secured clithe amount of any secure Creditors Who Have Clair  Current value of the   | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$3,275.00  aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the                  |
| Part 2: Do you omeon  Cars N Y 3.1    | Describe own, leader else drome else drome, vans, to other information of the control of the con | Ford Escape 2003 ate mileage: Ford Mustang 2011 ate mileage: 10600  | who has an interest in the pr Debtor 1 only Debtor 2 only At least one of the debtors a Check if this is communit (see instructions)  Who has an interest in the pr Debtor 1 and Debtor 2 only At least one of the debtors a Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only | operty? Check one and another y property operty? Check one | Do not deduct secured class the amount of any secure Creditors Who Have Clais Current value of the entire property?  \$3,275.00  Do not deduct secured class amount of any secure Creditors Who Have Clais Current value of the entire property?  | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$3,275.00  aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? |
| Part 2: Do you omeon  Cars N Y 3.1    | Describe own, leader else drome else drome, vans, to other information of the control of the con | Ford Escape 2003 ate mileage: mation:  Ford Mustang 2011 ate mileage: 10600 rmation:  | who has an interest in the pr Debtor 1 only Debtor 2 only At least one of the debtors a Check if this is communit (see instructions)  Who has an interest in the pr Debtor 1 and Debtor 2 only At least one of the debtors a Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only | operty? Check one and another y property operty? Check one | Do not deduct secured clithe amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$3,275.00  Do not deduct secured clithe amount of any secure Creditors Who Have Clair  Current value of the   | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$3,275.00  aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the                  |

☐ Yes

|                           | Case 10-32505 Duc 1   |                             | Dags 11 of F0                          | 28.34 Desc Main   |
|---------------------------|---|-----------------------------|--|---|
| Debtor 1                  | Jaron Henyard   | Document                    | Page 11 of 50 Case numbe               | r (if known)  |
|                           | ne dollar value of the portion you ow<br>you have attached for Part 2. Write t                          |                             |  |   |
| Part 3: Do                | escribe Your Personal and Household Ite   | ems                         |  |   |
| Do you o                  | wn or have any legal or equitable int   | erest in any of the follow  | ing items?                             | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| <i>Examp</i><br>□ No<br>□ | nold goods and furnishings bles: Major appliances, furniture, linens, Describe                          | china, kitchenware          |  | oranio oi oxonipuore.   |
|                           | used household bed, books, pict   |                             | ches, tv stand, coffee table,          | \$200.00  |
| □ No                      |   |                             | ment; computers, printers, scanne      | rs; music collections; electronic devices   |
|                           | used consumer   | electronics, cell phone     | e, tv,                                 | \$500.00  |
| <i>Examp</i><br>■ No      | ibles of value  bles: Antiques and figurines; paintings, pother collections, memorabilia, col  Describe |                             | oks, pictures, or other art objects; s | tamp, coin, or baseball card collections;   |
| Examp  No                 | nent for sports and hobbies  bles: Sports, photographic, exercise, an musical instruments  Describe     | d other hobby equipment; I  | picycles, pool tables, golf clubs, ski | is; canoes and kayaks; carpentry tools;   |
| ■ No                      | ms aples: Pistols, rifles, shotguns, ammunit . Describe   | ion, and related equipment  |  |   |
| ■ No                      | es aples: Everyday clothes, furs, leather co . Describe   | ats, designer wear, shoes,  | accessories                            |   |
| ■ No                      | ry<br>oples: Everyday jewelry, costume jewelr<br>. Describe   | y, engagement rings, wedd   | ding rings, heirloom jewelry, watche   | es, gems, gold, silver  |
| Exam<br>■ No              | arm animals  nples: Dogs, cats, birds, horses  Describe   |                             |  |   |
| ■ No                      | ther personal and household items y . Give specific information   | ou did not already list, ir | ncluding any health aids you did       | not list  |

Official Form 106A/B Schedule A/B: Property page 2

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| 15  |   |          | -                           | including any entries for pages you have attached  | \$700.00  |
|-----|---|----------|-----------------------------|--|---|
|     | ior Part 3. Write that i                            | lullibei | nere                        |  |   |
| Pa  | rt 4: Describe Your Finance                         | ial Asse | ts                          |  |   |
|     |   |          | equitable interest in any   | of the following?  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|     | □ No  |          | our wallet, in your home, i | n a safe deposit box, and on hand when you file your petiti  | ion   |
|     |   |          |                             | Cash   | \$500.00  |
|     |   |          |                             | certificates of deposit; shares in credit unions, brokerage the same institution, list each.  Institution name:          | houses, and other similar   |
|     |   | 17.1.    | Checking account            | MECU   | \$0.00  |
|     |   |          |                             |  |   |
|     |   | 17.2.    | Savings account             | MECU   | \$0.00  |
|     |   | 17.3.    | Savings                     | FMECU  | \$900.00  |
|     | ■ No  |          | ent accounts with brokera   | ge firms, money market accounts  |   |
|     | ☐ Yes   |          | Institution or issuer name  | 3:   |   |
| 19. | Non-publicly traded sto<br>joint venture<br>■ No    | ock and  | interests in incorporate    | d and unincorporated businesses, including an interes  | st in an LLC, partnership, and  |
|     | ☐ Yes. Give specific info                           |          | about them<br>me of entity: | % of ownership:  |   |
| 20. | Negotiable instruments                              | include  | personal checks, cashiers   | e and non-negotiable instruments ' checks, promissory notes, and money orders. to someone by signing or delivering them. |   |
|     | ■ No  |          |                             |  |   |
|     | ☐ Yes. Give specific info                           |          | about them<br>uer name:     |  |   |
|     | Retirement or pension Examples: Interests in II  No |          |                             | ), thrift savings accounts, or other pension or profit-sharing   | plans   |
|     | ☐ Yes. List each account                            |          | tely.<br>of account:        | Institution name:  |   |
|     |   | d deposi | ts you have made so that    | you may continue service or use from a company cutilities (electric, gas, water), telecommunications compar              | nies, or others   |
|     | Yes   |          |                             | Institution name or individual:  |   |

Debtor 1

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Case number (if known)

Document Debtor 1 **Jaron Henyard** 

|    |  | Rental deposit  | Landlord                         |                                      | \$1,900.00   |
|----|--|---|----------------------------------|--------------------------------------|--|
| 23 | Annuities (A contrac                       | ct for a periodic payment of mone   | ev to you either for life or for | r a number of years)                 |  |
|    | ■ No                                       |   | y to you, ourier for me of for   | a number of years)                   |  |
|    | ☐ Yes                                      | Issuer name and description.  |                                  |                                      |  |
| 24 |  | ation IRA, in an account in a q<br>1), 529A(b), and 529(b)(1).                      | ualified ABLE program, or        | under a qualified state tuitio       | n program.   |
|    | ■ No<br>□ Yes                              | Institution name and description  | n. Separately file the records   | s of any interests.11 U.S.C. § 52    | 21(c):   |
| 25 | . Trusts, equitable or ■ No                | future interests in property (o   | ther than anything listed i      | n line 1), and rights or power       | s exercisable for your benefit   |
|    |  | information about them  |                                  |                                      |  |
| 26 |  | t, trademarks, trade secrets, ardomain names, websites, procee                      |                                  |                                      |  |
|    |  | information about them  |                                  |                                      |  |
| 27 | Examples: Building                         | es, and other general intangible permits, exclusive licenses, coop                  |                                  | s, liquor licenses, professional l   | icenses  |
|    | ■ No □ Yes. Give specific                  | information about them  |                                  |                                      |  |
| N  | loney or property owe                      | ed to you?  |                                  |                                      | Current value of the   |
|    |  |   |                                  |                                      | <ul><li>portion you own?</li><li>Do not deduct secured claims or exemptions.</li></ul> |
| 28 | . Tax refunds owed to                      | o you   |                                  |                                      |  |
|    | ■ No                                       | •   |                                  |                                      |  |
|    | ☐ Yes. Give specific                       | information about them, includin  | g whether you already filed t    | the returns and the tax years        |  |
| 29 | Family support                             | or lump sum alimony, spousal s  | upport child cupport maint       | onanco divorco cottloment, pre       | porty cottlement   |
|    | ■ No                                       | or fulfip suffi allifforty, spousars  | apport, crilia support, mainte   | snance, divorce settlement, pro      | perty settlement   |
|    | ☐ Yes. Give specific                       | information   |                                  |                                      |  |
| 30 |  | neone owes you<br>vages, disability insurance paym<br>unpaid loans you made to some |                                  | pay, vacation pay, workers' co       | ompensation, Social Security   |
|    | ■ No □ Yes. Give specific                  | information   |                                  |                                      |  |
| 31 | . Interests in insuran Examples: Health, d | ce policies<br>isability, or life insurance; health                                 | savings account (HSA); cre       | edit, homeowner's, or renter's in    | surance  |
|    |  | urance company of each policy a   | and list its value.              |                                      |  |
|    |  | Company name:   |                                  | Beneficiary:                         | Surrender or refund value:   |
| 32 | . Any interest in prop                     | perty that is due you from som  | eone who has died                |                                      |  |
| -  | If you are the benefic someone has died.   | ciary of a living trust, expect prod  |                                  | policy, or are currently entitled to | o receive property because   |
|    | ■ No □ Yes. Give specific                  | information   |                                  |                                      |  |
|    |  |   |                                  |                                      |  |

Official Form 106A/B Schedule A/B: Property page 4

| 5.1.           |               |   | Doc 1             | Filed 10/12/16<br>Document | Page 14 of 50                               | Desc Main      |
|----------------|---------------|---|-------------------|----------------------------|---|----------------|
| Debt           | tor 1         | Jaron Henyard   |                   |                            | Case number (if known)                      |                |
| <i>.</i>       | Examp<br>I No | against third parties, who les: Accidents, employmen  Describe each claim |                   |                            | it or made a demand for payment<br>s to sue |                |
| 24 0           | \.            |   |                   |                            |   | and off alaims |
|                | otner c<br>No | contingent and unliquidate  | ed claims of ev   | ery nature, includin       | g counterclaims of the debtor and rights to | set off claims |
|                |               | Describe each claim   |                   |                            |   |                |
|                | 1 103.        | Describe each claim   |                   |                            |   |                |
|                |               | ancial assets you did not   | already list      |                            |   |                |
|                | No            |   |                   |                            |   |                |
| Ц              | I Yes.        | Give specific information   |                   |                            |   |                |
|                |               | he dollar value of all of your<br>ort 4. Write that number he             |                   |                            | ny entries for pages you have attached      | \$3,300.00     |
| Part 5         | 5: Des        | scribe Any Business-Related   | Property You Ov   | wn or Have an Interest     | In. List any real estate in Part 1.         |                |
| 37. <b>D</b> o | o you o       | own or have any legal or equi   | table interest in | any business-related p     | roperty?                                    |                |
|                | No. Go        | to Part 6.  |                   |                            |   |                |
|                | Yes. G        | to to line 38.  |                   |                            |   |                |
|                |               |   |                   |                            |   |                |
| Part 6         |               | scribe Any Farm- and Comme<br>ou own or have an interest in fa            |                   |                            | n or Have an Interest In.                   |                |
| 46. <b>D</b>   | o you         | own or have any legal or  | equitable inte    | rest in any farm- or o     | commercial fishing-related property?        |                |
| I              | No.           | Go to Part 7.   |                   |                            |   |                |
| [              | ☐ Yes.        | Go to line 47.  |                   |                            |   |                |
| Part 7         | 7:            | Describe All Property You (   | Own or Have an I  | Interest in That You Did   | d Not List Above                            |                |
|                |               | have other property of a  |                   |                            |   |                |
|                |               | oles: Season tickets, country   | y club members    | hip                        |   |                |
|                | No            | <b>~</b>  |                   |                            |   |                |
| Ц              | I Yes. (      | Give specific information   |                   |                            |   |                |
| 54.            | Add tl        | he dollar value of all of yo  | our entries fron  | n Part 7. Write that n     | umber here                                  | \$0.00         |
| Part 8         | 8:            | List the Totals of Each Part of   | of this Form      |                            |   |                |
| 55.            | Part 1        | : Total real estate, line 2   |                   |                            |   | \$0.00         |
| 56.            | Part 2        | : Total vehicles, line 5  |                   |                            | \$8,275.00                                  |                |
| 57.            | Part 3        | : Total personal and hous   | sehold items, l   | ine 15                     | \$700.00                                    |                |
| 58.            | Part 4        | : Total financial assets, li  | ne 36             |                            | \$3,300.00                                  |                |
| 59.            | Part 5        | : Total business-related p  | property, line 4  | 5                          | \$0.00                                      |                |
| 60.            | Part 6        | : Total farm- and fishing-  | related propert   | ty, line 52                | \$0.00                                      |                |
| 61.            | Part 7        | : Total other property not  | listed, line 54   | +                          | \$0.00                                      |                |

Official Form 106A/B Schedule A/B: Property page 5

\$12,275.00

Copy personal property total

62. **Total personal property.** Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$12,275.00

\$12,275.00

|                     |                          |                   | 111 1 1000 13 01 30 |  |
|---------------------|--------------------------|-------------------|---------------------|--|
| Fill in this infor  | rmation to identify your | case:             |                     |  |
| Debtor 1            | Jaron Henyard            |                   |                     |  |
|                     | First Name               | Middle Name       | Last Name           |  |
| Debtor 2            |                          |                   |                     |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name           |  |
| United States B     | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS         |  |
| Case number         |                          |                   |                     |  |
| (if known)          |                          |                   |                     |  |
|                     |                          |                   |                     |  |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify t | the Property | You Claim : | as Exempt |
|---------|------------|--------------|-------------|-----------|
|---------|------------|--------------|-------------|-----------|

| 1. | Which set of exemptions are | vou claiming? | Check one only. | even if your spo | ouse is filing with you |
|----|-----------------------------|---------------|-----------------|------------------|-------------------------|
|    |                             |               |                 |                  |                         |

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim |   | on you own            |  | Specific laws that allow exemption |
|---|--------------------------------------|-----------------------------------|---|-----------------------|--|------------------------------------|
|   | Copy the value from<br>Schedule A/B  | Che                               | ck only one box for each exemption.                             |                       |  |                                    |
| 2003 Ford Escape 170000 miles   | \$3,275.00                           |                                   | \$2,400.00  | 735 ILCS 5/12-1001(c) |  |                                    |
| Ellie Irolli Goriedale 772.   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                       |  |                                    |
| 2003 Ford Escape 170000 miles   | \$3,275.00                           |                                   | \$875.00  | 735 ILCS 5/12-1001(b) |  |                                    |
| Ellie Irolli Schedule A.B. 9.1  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                       |  |                                    |
| used household goods, furniture, couches, tv stand, coffee table, bed,              | \$200.00                             |                                   | \$0.00  | 735 ILCS 5/12-1001(b) |  |                                    |
| books, pictures Line from Schedule A/B: 6.1   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                       |  |                                    |
| used consumer electronics, cell phone, tv,  | \$500.00                             |                                   | \$0.00  | 735 ILCS 5/12-1001(b) |  |                                    |
| Line from Schedule A/B: 7.1   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                       |  |                                    |
| Cash Line from Schedule A/B: 16.1   | \$500.00                             |                                   | \$325.00  | 735 ILCS 5/12-1001(b) |  |                                    |
| Line nom Schedule AVD. 10.1   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                       |  |                                    |

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Case number (if known)

|      | ef description of the property and line on hedule A/B that lists this property          |                                     |           | unt of the exemption you claim                                  | Specific laws that allow exemption |
|------|---|-------------------------------------|-----------|---|------------------------------------|
|      |   | Copy the value from<br>Schedule A/B | Chec      | k only one box for each exemption.                              |                                    |
|      | vings: FMECU e from Schedule A/B: 17.3  | \$900.00                            | •         | \$900.00  | 735 ILCS 5/12-1001(b)              |
|      | e Holl Garedale A/B. TTIO   |                                     |           | 100% of fair market value, up to any applicable statutory limit |                                    |
|      | ental deposit: Landlord   | \$1,900.00                          |           | \$1,900.00  | 735 ILCS 5/12-1001(b)              |
| LIII | e IIOIII Scriedule A/B. <b>22.1</b>   |                                     |           | 100% of fair market value, up to any applicable statutory limit |                                    |
| (Su  | e you claiming a homestead exemption<br>ubject to adjustment on 4/01/19 and every<br>No | 3 years after that for ca           | ases file | ·   | •                                  |
|      | Yes. Did you acquire the property cover  No   | ed by the exemption wi              | ithin 1,2 | 215 days before you filed this case                             | ?                                  |
|      | _   |                                     |           |   |                                    |

| Case   |  |   |                 |   |  |                          |
|--|--|---|-----------------|---|--|--------------------------|
| Fill in this informatio  | n to identify you  |   | ae 17 d         | 01.50   |  |                          |
|  | ir to lucitily you   | ii case.  |                 |   |  |                          |
|  | aron Henyard   | ACT III A   |                 |   |  |                          |
|  | st Name  | Middle Name Last  | Name            |   |  |                          |
| Debtor 2<br>(Spouse if, filing) Fir  | st Name  | Middle Name Last  | Name            |   |  |                          |
| (op-1111 ii, iiii)   |  |   |                 |   |  |                          |
| United States Bankrup  | tcy Court for the:   | NORTHERN DISTRICT OF ILLINOIS   | S               |   |  |                          |
| Case number  |  |   |                 |   |  |                          |
| (if known)   |  |   |                 |   | ☐ Chec                                       | ck if this is an         |
|  |  |   |                 |   |  | nded filing              |
|  |  |   |                 |   |  | · ·                      |
| Official Form 10   | )6D  |   |                 |   |  |                          |
|  |  | Who Have Claims Sec   | rurad           | by Propert  | N/   | 12/15                    |
| Ciledule D.  | Creditors  | Wild have Claims Sec  | sui eu          | by Fropert  | у  | 12/13                    |
|  |  | If two married people are filing together, bo   |                 |   |  |                          |
| s needed, copy the Addi<br>number (if known).  | tional Page, fill it   | out, number the entries, and attach it to this  | s form. On t    | he top of any addition  | nal pages, write your r                      | name and case            |
| . Do any creditors have  | claims secured by  | vour property?  |                 |   |  |                          |
|  | -  | his form to the court with your other sche  | dulas Vau       | have nothing also t   | a rapart on this form                        |                          |
|  | box and submit t   | his form to the court with your other sche  | dules. You      | nave nothing eise t   | o report on this form.                       |                          |
|  |  |   |                 |   |  |                          |
| Yes. Fill in all o   | f the information  | below.  |                 |   |  |                          |
|  | f the information cured Claims   | below.  |                 |   |  |                          |
| Part 1: List All Sec   | cured Claims   |   | enarately       | Column A  | Column B                                     | Column C                 |
| Part 1: List All Sec<br>2. List all secured claim<br>for each claim. If more th  | s. If a creditor has an one creditor has   | more than one secured claim, list the creditor s  |                 | Amount of claim   | Value of collateral                          | Unsecured                |
| Part 1: List All Sec<br>2. List all secured claim<br>for each claim. If more th  | s. If a creditor has an one creditor has   | more than one secured claim, list the creditor s  |                 | Amount of claim Do not deduct the                                 | Value of collateral that supports this       | Unsecured portion        |
| Part 1: List All Sec<br>2. List all secured claim<br>for each claim. If more th<br>much as possible, list the  | s. If a creditor has an one creditor has   | more than one secured claim, list the creditor s<br>a particular claim, list the other creditors in Pa<br>cal order according to the creditor's name.   | art 2. As       | Amount of claim Do not deduct the value of collateral.            | Value of collateral that supports this claim | Unsecured portion If any |
| Part 1: List All Sec<br>2. List all secured claim<br>for each claim. If more th<br>much as possible, list the  | s. If a creditor has an one creditor has   | more than one secured claim, list the creditor s a particular claim, list the other creditors in Pacal order according to the creditor's name.  Describe the property that secures the cla  | aim:            | Amount of claim Do not deduct the                                 | Value of collateral that supports this       | Unsecured portion If any |
| 2. List all secured claim for each claim. If more th much as possible, list the 2.1 Andigo Cu  | s. If a creditor has an one creditor has   | more than one secured claim, list the creditor s<br>a particular claim, list the other creditors in Pa<br>cal order according to the creditor's name.   | aim:            | Amount of claim Do not deduct the value of collateral.            | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more th much as possible, list the 2.1 Andigo Cu  | s. If a creditor has an one creditor has   | more than one secured claim, list the creditor s a particular claim, list the other creditors in Pacal order according to the creditor's name.  Describe the property that secures the classification of the compact of | aim:            | Amount of claim Do not deduct the value of collateral.            | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more th much as possible, list the  2.1 Andigo Cu  Creditor's Name  | s. If a creditor has an one creditor has claims in alphabeti   | more than one secured claim, list the creditor s a particular claim, list the other creditors in Pacal order according to the creditor's name.  Describe the property that secures the cla  2011 Ford Mustang 106000 miles  | aim:            | Amount of claim Do not deduct the value of collateral.            | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more th much as possible, list the  2.1 Andigo Cu  Creditor's Name  | s. If a creditor has an one creditor has claims in alphabeti   | more than one secured claim, list the creditor s a particular claim, list the other creditors in Pacal order according to the creditor's name.  Describe the property that secures the claim 100000 miles Needs a motor replacement.  As of the date you file, the claim is: Check  | aim:            | Amount of claim Do not deduct the value of collateral.            | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more th much as possible, list the  2.1 Andigo Cu  Creditor's Name  | s. If a creditor has an one creditor has claims in alphabeti   | more than one secured claim, list the creditor s a particular claim, list the other creditors in Pacal order according to the creditor's name.  Describe the property that secures the claim 1000000000000000000000000000000000000  | aim:            | Amount of claim Do not deduct the value of collateral.            | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more th much as possible, list the  2.1 Andigo Cu  Creditor's Name  1205 E Algono Schaumburg,   | s. If a creditor has an one creditor has claims in alphabeti   | more than one secured claim, list the creditor s a particular claim, list the other creditors in Pacal order according to the creditor's name.  Describe the property that secures the claim 100000 miles Needs a motor replacement.  As of the date you file, the claim is: Check apply.  Contingent   | aim:            | Amount of claim Do not deduct the value of collateral.            | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Andigo Cu Creditor's Name  1205 E Algono Schaumburg, Number, Street, City, S  | s. If a creditor has an one creditor has claims in alphabeti   | more than one secured claim, list the creditor s a particular claim, list the other creditors in Pacal order according to the creditor's name.  Describe the property that secures the claim 1000000000000000000000000000000000000  | aim:            | Amount of claim Do not deduct the value of collateral.            | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Andigo Cu Creditor's Name  1205 E Algono Schaumburg, Number, Street, City, S  | s. If a creditor has an one creditor has claims in alphabeti   | more than one secured claim, list the creditor s a particular claim, list the other creditors in Pacal order according to the creditor's name.  Describe the property that secures the claim 100000 miles Needs a motor replacement.  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed   | aim:            | Amount of claim Do not deduct the value of collateral. \$9,834.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Andigo Cu Creditor's Name  1205 E Algono Schaumburg, Number, Street, City, S  Who owes the debt? Company of the secure of the s | s. If a creditor has an one creditor has claims in alphabeti   | more than one secured claim, list the creditor single a particular claim, list the other creditors in Pacal order according to the creditor's name.  Describe the property that secures the claim 1000000000000000000000000000000000000   | aim:            | Amount of claim Do not deduct the value of collateral. \$9,834.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Andigo Cu Creditor's Name  1205 E Algono Schaumburg, Number, Street, City, S  Who owes the debt? Co Debtor 1 only Debtor 2 only   | s. If a creditor has an one creditor has claims in alphabeti quin Rd IL 60196 State & Zip Code Check one.                      | more than one secured claim, list the creditor's a particular claim, list the other creditor's in Pacal order according to the creditor's name.  Describe the property that secures the claim is a motor replacement.  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgater loan)  | aim: S all that | Amount of claim Do not deduct the value of collateral. \$9,834.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Andigo Cu Creditor's Name  1205 E Algono Schaumburg, Number, Street, City, S  Who owes the debt? Output Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2   | eured Claims  s. If a creditor has an one creditor has claims in alphabeti  quin Rd IL 60196  State & Zip Code  Check one.     | more than one secured claim, list the creditor's a particular claim, list the other creditor's name.  Describe the property that secures the claim is: Check apply.  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgater loan)  Statutory lien (such as tax lien, mechanic  | aim: S all that | Amount of claim Do not deduct the value of collateral. \$9,834.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Andigo Cu Creditor's Name  1205 E Algono Schaumburg, Number, Street, City, S  Who owes the debt? Co Debtor 1 only Debtor 2 only At least one of the det   | eured Claims  s. If a creditor has an one creditor has claims in alphabeti  quin Rd IL 60196  State & Zip Code  Check one.     | more than one secured claim, list the creditor sit a particular claim, list the other creditors in Paracal order according to the creditor's name.  Describe the property that secures the claim 100000 miles 100000 miles 1000000000000000000000000000000000000  | aim: S all that | Amount of claim Do not deduct the value of collateral. \$9,834.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Andigo Cu Creditor's Name  1205 E Algono Schaumburg, Number, Street, City, S  Who owes the debt? Co Debtor 1 only Debtor 2 only At least one of the det   | eured Claims  s. If a creditor has an one creditor has claims in alphabeti  quin Rd IL 60196  State & Zip Code  Check one.     | more than one secured claim, list the creditor's a particular claim, list the other creditor's name.  Describe the property that secures the claim is: Check apply.  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgater loan)  Statutory lien (such as tax lien, mechanic  | aim: S all that | Amount of claim Do not deduct the value of collateral. \$9,834.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Andigo Cu Creditor's Name  1205 E Algono Schaumburg, Number, Street, City, S  Who owes the debt? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the det Check if this claim re   | s. If a creditor has an one creditor has an one creditor has claims in alphabeti  quin Rd IL 60196 State & Zip Code Check one. | more than one secured claim, list the creditor sit a particular claim, list the other creditors in Paracal order according to the creditor's name.  Describe the property that secures the claim 100000 miles 100000 miles 1000000000000000000000000000000000000  | aim: S all that | Amount of claim Do not deduct the value of collateral. \$9,834.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Andigo Cu Creditor's Name  1205 E Algono Schaumburg, Number, Street, City, S  Who owes the debt? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the det Check if this claim re   | s. If a creditor has an one creditor has an one creditor has claims in alphabeti  quin Rd IL 60196 State & Zip Code Check one. | more than one secured claim, list the creditor sit a particular claim, list the other creditors in Paracal order according to the creditor's name.  Describe the property that secures the claim 100000 miles 100000 miles 1000000000000000000000000000000000000  | aim: S all that | Amount of claim Do not deduct the value of collateral. \$9,834.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Andigo Cu Creditor's Name  1205 E Algono Schaumburg, Number, Street, City, S  Who owes the debt? Co Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the det Check if this claim re  | s. If a creditor has an one creditor has an one creditor has claims in alphabeti  quin Rd IL 60196 State & Zip Code Check one. | more than one secured claim, list the creditor sit a particular claim, list the other creditors in Paracal order according to the creditor's name.  Describe the property that secures the claim 100000 miles 100000 miles 1000000000000000000000000000000000000  | aim: S all that | Amount of claim Do not deduct the value of collateral. \$9,834.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Andigo Cu Creditor's Name  1205 E Algono Schaumburg, Number, Street, City, S  Who owes the debt? Co Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the det Check if this claim re  | s. If a creditor has an one creditor has an one creditor has claims in alphabeti  quin Rd IL 60196 State & Zip Code Check one. | more than one secured claim, list the creditor sit a particular claim, list the other creditors in Paracal order according to the creditor's name.  Describe the property that secures the claim 100000 miles 100000 miles 1000000000000000000000000000000000000  | aim: S all that | Amount of claim Do not deduct the value of collateral. \$9,834.00 | Value of collateral that supports this claim | Unsecured portion If any |

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$9,834.00

\$9,834.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| C  | 35 <del>C</del> 10-32303 D0   | Document   | Page 18 c  | 10/12/10 14.20.<br>of 50  | 54 Desc IVI   | airi   |
|--|---|--|--|---|---|--|
| Fill in this infor   | mation to identify your cas   |  |  |   |   |  |
| Debtor 1   | Jaron Henyard   |  |  |   |   |  |
|  | First Name  | Middle Name  | Last Name  |   |   |  |
| Debtor 2   | First Name  | Medalla Nassa  | LastName   |   |   |  |
| (Spouse if, filing)  | First Name  | Middle Name  | Last Name  |   |   |  |
| United States Ba   | ankruptcy Court for the:  | NORTHERN DISTRICT OF ILL   | JNOIS  |   |   |  |
| Case number  |   |  |  |   |   |  |
| (if known)   |   |  |  |   | ☐ Check   | if this is an  |
|  |   |  |  |   | amend   | ed filing  |
| Official Forr  | n 106F/F  |  |  |   |   |  |
|  |   | o Have Unsecured   | Claims   |   |   | 12/15  |
| iny executory con<br>Schedule G: Execu<br>Schedule D: Credi<br>eft. Attach the Col<br>lame and case nu | tracts or unexpired leases tha<br>utory Contracts and Unexpired<br>tors Who Have Claims Secure<br>ntinuation Page to this page. I<br>mber (if known). | art 1 for creditors with PRIORIT'<br>at could result in a claim. Also li<br>d Leases (Official Form 106G). D<br>d by Property. If more space is r<br>f you have no information to rep  | st executory cont<br>o not include any<br>needed, copy the | tracts on Schedule A/B: Propertially sets of partially sets Part you need, fill it out, n | roperty (Official Fori<br>ecured claims that a<br>number the entries ir | n 106A/B) and on<br>re listed in<br>the boxes on the |
|  | II of Your PRIORITY Unse  |  |  |   |   |  |
|  | ors have priority unsecured c   | laims against you?   |  |   |   |  |
| □ No. Go to F  | Part 2.   |  |  |   |   |  |
| Yes.   |   |  |  |   |   |  |
| identify what ty<br>possible, list th  | rpe of claim it is. If a claim has be claims in alphabetical order a  | a creditor has more than one prior oth priority and nonpriority amount ccording to the creditor's name. If yular claim, list the other creditors in  | s, list that claim he you have more that                   | ere and show both priority ar   | nd nonpriority amount   | s. As much as  |
| (For an explan   | ation of each type of claim, see  | the instructions for this form in the  | instruction booklet  | t.) Total claim   | Priority  | Nonpriority  |
|  |   |  |  | Total claim   | amount  | amount   |
|  | I Revenue Service   | Last 4 digits of accour  | nt number  | \$2,300.00  | \$2,300.00  | \$0.00   |
| Priority Ci  | reditor's Name<br><b>∢7346</b>  | When was the debt inc  | curred?  |   |   |  |
|  | elphia, PA 19101-7346   |  |  |   |   |  |
|  | Street City State ZIp Code  d the debt? Check one.  | As of the date you file  | the claim is: Che  | eck all that apply  |   |  |
| _  |   | ☐ Contingent   |  |   |   |  |
| Debtor 1   | only  | ☐ Unliquidated   |  |   |   |  |
| Debtor 2   | only  | ☐ Disputed   |  |   |   |  |
| Debtor 1   | and Debtor 2 only   | Type of PRIORITY uns   |  |   |   |  |
| At least o   | ne of the debtors and another   | ☐ Domestic support ob  | ligations  |   |   |  |
| ☐ Check if   | this claim is for a community   | debt Taxes and certain of  | her debts you owe  | the government  |   |  |
| Is the claim   | subject to offset?  | ☐ Claims for death or p  | personal injury whil                                       | le you were intoxicated   |   |  |
| No   |   | Other. Specify   |  |   |   |  |
| ☐ Yes  |   |  |  |   |   |  |
| Part 2: List A   | II of Your NONPRIORITY U  | Jnsecured Claims   |  |   |   |  |
| 3. Do any credit   | ors have nonpriority unsecure   | ed claims against you?   |  |   |   |  |
|  |   | Submit this form to the court with   | vour other schedul   | es.   |   |  |
| Yes.   | and participation and partic  | The second secon | ,  |   |   |  |
|  |   |  |  |   |   |  |
| <ol><li>List all of you</li></ol>  | r nonpriority unsecured claim   | s in the alphabetical order of the   | e creditor who ho  | olds each claim. If a credito   | r has more than one   | nonpriority  |

unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Debtor 1 Jaron Henyard Case number (if know) 4.1 Capital One Last 4 digits of account number 4780 \$299.00 Nonpriority Creditor's Name Opened 12/14 Last Active 15000 Capital One Dr When was the debt incurred? 09/16 Richmond, VA 23238 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 Check N Go Last 4 digits of account number \$1,500.00 Nonpriority Creditor's Name When was the debt incurred? 16120 State St South Holland, IL 60473 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 City of Chicago Last 4 digits of account number \$3,000.00 Nonpriority Creditor's Name **Department of Finance** When was the debt incurred? PO Box 88292 Chicago, IL 60680-1292 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

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Debtor 1 Jaron Henyard Case number (if know) 4.4 Fed Loan Sevicing Last 4 digits of account number 0002 \$2,706.00 Nonpriority Creditor's Name Opened 09/11 Last Active Po Box 60610 When was the debt incurred? 9/30/16 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify **Educational** 4.5 Last 4 digits of account number Fed Loan Sevicing 0001 \$3,964.00 Nonpriority Creditor's Name Opened 09/11 Last Active Po Box 60610 When was the debt incurred? 9/30/16 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.6 Motorola Ecu Last 4 digits of account number 9726 \$774.00 Nonpriority Creditor's Name Opened 08/11 Last Active 1205 E Algonquin Rd When was the debt incurred? 09/16 Schaumburg, IL 60196 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Jaron Henyard Case number (if know) 4.7 Mrsi Last 4 digits of account number 0757 \$557.00 Nonpriority Creditor's Name 2250 E Devon Ave Ste 352 When was the debt incurred? **Opened 08/15** Des Plaines, IL 60018 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Ingalls Memorial** Other. Specify ☐ Yes Hospital 4.8 Vision Financial Servi Last 4 digits of account number 5804 \$557.00 Nonpriority Creditor's Name 1900 W Severs Rd When was the debt incurred? **Opened 02/16** La Porte, IN 46350 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Ingalls Memorial** ☐ Yes Other. Specify Hospital Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Arnold Scott Harris P.C. Line **4.3** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 111 W Jackson Suite 600 Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60604 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 30285 ■ Part 2: Creditors with Nonpriority Unsecured Claims Salt Lake City, UT 84130 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address City of Chicago Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Department of Revenue** ■ Part 2: Creditors with Nonpriority Unsecured Claims 121 N. LaSalle Room 107A Chicago, IL 60602 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Fed Loan Sevicing Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 69184 Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

Page 22 of 50 Case number (if know) Document Debtor 1 Jaron Henyard

| Harrisburg, PA 17106  | Last 4 digits of account number  |  |
|---|--|--|
| Name and Address Zachary T. Fardon United States Attorney - NDIL 219 S. Dearborn St., 5th Floor Chicago, IL 60604 | On which entry in Part 1 or Part 2<br>Line <b>2.1</b> of ( <i>Check one</i> ): | did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |
|   | Last 4 digits of account number  |  |

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| 6a. | Domestic support obligations  | 6a.  | \$  | 0.00  |
|-----|---|--|---|---|
|     |   |  |   |   |
| 6b. | Taxes and certain other debts you owe the government                              | 6b.  | \$  | 2,300.00  |
| 6c. | Claims for death or personal injury while you were intoxicated                    | 6c.  | \$  | 0.00  |
| 6d. | Other. Add all other priority unsecured claims. Write that amount here.           | 6d.  | \$  | 0.00  |
| 6e. | Total Priority. Add lines 6a through 6d.  | 6e.  | \$  | 2,300.00  |
|     |   |  | Т   | otal Claim  |
| 6f. | Student loans   | 6f.  | \$  | 6,670.00  |
| 60  | Obligations arising out of a congration agreement or divorce that                 |  |   |   |
| og. |   | 6g.  | \$  | 0.00  |
| 6h. | Debts to pension or profit-sharing plans, and other similar debts                 | 6h.  | \$  | 0.00  |
| 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here. | 6i.  | \$  | 6,687.00  |
| 6j. | Total Nonpriority. Add lines 6f through 6i.                                       | 6j.  | \$  | 13,357.00   |
|     | 6c.<br>6d.<br>6e.<br>6f.<br>6g.<br>6h.<br>6i.                                     | <ul> <li>6c. Claims for death or personal injury while you were intoxicated</li> <li>6d. Other. Add all other priority unsecured claims. Write that amount here.</li> <li>6e. Total Priority. Add lines 6a through 6d.</li> <li>6f. Student loans</li> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other similar debts</li> <li>6i. Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ul> | 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d.  6e. Total Priority. Add lines 6a through 6d. 6e.  6f. Student loans 6f.  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6c. 6d. 6d. 6d. 6d. | 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$  6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. Student loans 6f. \$  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.  8 |

| Fill in this infor                      |               |                   |             |                     |
|---|---------------|-------------------|-------------|---------------------|
| Debtor 1                                | Jaron Henyard |                   |             |                     |
|   | First Name    | Middle Name       | Last Name   |                     |
| Debtor 2                                |               |                   |             |                     |
| (Spouse if, filing)                     | First Name    | Middle Name       | Last Name   |                     |
| United States Bankruptcy Court for the: |               | NORTHERN DISTRICT | OF ILLINOIS |                     |
| Case number                             |               |                   |             |                     |
| (if known)                              |               |                   |             | Check if this is an |
|   |               |                   |             | amended filing      |

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Autumn Ridge Apartments
119 Sycamore Dr
Park Forest, IL 60466

State what the contract or lease is for
lease residence

|                          |   | Docume                    | ent Page 24 d            | of 50   |
|--------------------------|---|---------------------------|--------------------------|---|
| Fill in this             | information to identify your  | case:                     |                          |   |
| Debtor 1                 | Jaron Henyard   |                           |                          |   |
|                          | First Name  | Middle Name               | Last Name                |   |
| Debtor 2                 | ing) First Name   | Middle Name               | Last Name                |   |
| (Spouse if, fili         | nig) Filst Name   | Middle Name               | Last Name                |   |
| United Sta               | ates Bankruptcy Court for the:  | NORTHERN DISTRICT         | OF ILLINOIS              |   |
| Case num                 | ber   |                           |                          |   |
| (if known)               |   |                           |                          | ☐ Check if this is an   |
|                          |   |                           |                          | amended filing  |
| Officia                  | l Form 106H   |                           |                          |   |
|                          |   | .1.4                      |                          |   |
| Sched                    | lule H: Your Cod  | ebtors                    |                          | 12/15   |
| ■ No □ Yes  2. Wit       | s<br>hin the last 8 years, have you   | lived in a community pr   | operty state or territor | ry? (Community property states and territories include  |
| ■ No.                    | na, California, Idaho, Louisiana,<br>. Go to line 3.<br>s. Did your spouse, former spou |                           |                          | ington, and Wisconsin.)   |
| in line<br>Form<br>out C | e 2 again as a codebtor only i  | f that person is a guaran | tor or cosigner. Make    | r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to fi |
|                          | Name, Number, Street, City, State and Zl  | P Code                    |                          | Check all schedules that apply:   |
| 3.1                      |   |                           |                          | ☐ Schedule D, line  |
|                          | Name  |                           |                          | Schedule D, line  |
|                          |   |                           |                          | ☐ Schedule G, line  |
| -                        | Number Street   |                           |                          |   |
|                          | City  | State                     | ZIP Code                 |   |
|                          |   |                           |                          |   |
| 3.2                      |   |                           |                          | ☐ Schedule D, line  |
|                          | Name  |                           |                          | ☐ Schedule E/F, line  |
|                          |   |                           |                          | ☐ Schedule G, line  |
| -                        | Number Street   |                           |                          | _   |
|                          | City  | State                     | ZIP Code                 |   |

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| Fill               | in this information to identify your c   | ase:                       |   |                       |                 |                                       |                                   |                      |                 |  |
|--------------------|--|----------------------------|---|-----------------------|-----------------|---------------------------------------|-----------------------------------|----------------------|-----------------|--|
|                    | otor 1 Jaron Henya   |                            |   |                       |                 |                                       |                                   |                      |                 |  |
|                    | otor 2   |                            |   |                       | _               |                                       |                                   |                      |                 |  |
| Uni                | ted States Bankruptcy Court for the  | : NORTHERN DISTRIC         | CT OF ILLINOIS                                |                       |                 |                                       |                                   |                      |                 |  |
|                    | se number  |                            | -   |                       |                 |                                       |                                   |                      | chapter         |  |
| O                  | fficial Form 106l  |                            |   |                       |                 | MM / DD/ \                            |                                   | ng date.             |                 |  |
|                    | chedule I: Your Inc  | ome                        |   |                       |                 | IVIIVI / DD/ 1                        | 111                               |                      | 12/15           |  |
| sup<br>spo<br>atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment | are married and not fili   | ng jointly, and your ith you, do not inclu    | spouse i<br>de infori | s livi<br>natio | ng with you, incl<br>n about your spo | ude informatio<br>ouse. If more s | n about<br>pace is i | your<br>needed, |  |
| 1.                 | Fill in your employment information.   |                            | Debtor 1                                      |                       |                 | Debtor 2                              | Debtor 2 or non-filing spouse     |                      |                 |  |
|                    | If you have more than one job,   | Employment status          | ■ Employed                                    |                       |                 | ☐ Empl                                | oyed                              |                      |                 |  |
|                    | attach a separate page with information about additional employers.  | Occupation                 | □ Not employed  Fedearl Mogul Motorparts Corp |                       |                 | ☐ Not e                               | mployed                           |                      |                 |  |
|                    | Include part-time, seasonal, or self-employed work.  | Employer's name            |   |                       |                 |                                       |                                   |                      |                 |  |
|                    | Occupation may include student or homemaker, if it applies.  | Employer's address         | 27300W 11 mil road<br>Southfield, MI 48034    |                       |                 |                                       |                                   |                      |                 |  |
|                    |  | How long employed t        | here? 1 mont                                  | h                     |                 |                                       |                                   |                      |                 |  |
| Par                | t 2: Give Details About Mor  | nthly Income               |   |                       |                 |                                       |                                   |                      |                 |  |
|                    | mate monthly income as of the duse unless you are separated.   | ate you file this form. If | you have nothing to r                         | eport for             | any li          | ne, write \$0 in the                  | space. Include                    | your nor             | n-filing        |  |
|                    | u or your non-filing spouse have mo<br>e space, attach a separate sheet to   |                            | ombine the informatio                         | n for all e           | emplo           | yers for that perso                   | on on the lines b                 | elow. If y           | you need        |  |
|                    |  |                            |   |                       |                 | For Debtor 1                          | For Debtor 2<br>non-filing sp     |                      |                 |  |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,   |                            |   | 2.                    | \$_             | 3,585.57                              | \$                                | N/A                  |                 |  |
| 3.                 | Estimate and list monthly overt  | ime pay.                   |   | 3.                    | +\$_            | 0.00                                  | +\$                               | N/A                  |                 |  |
| 4.                 | Calculate gross Income. Add lin  | ne 2 + line 3.             |   | 4.                    | \$_             | 3,585.57                              | \$                                | N/A                  |                 |  |

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| Debt | tor 1                 | Jaron Henyard   | _         | (         | Case number (if i | known) |          |             |                  |                |
|------|-----------------------|---|-----------|-----------|-------------------|--------|----------|-------------|------------------|----------------|
|      |                       |   |           |           | For Debtor 1      |        |          | Debtor 2    |                  |                |
|      | Cor                   | by line 4 here  | 4.        |           | \$ 3.58           | 5.57   | non-     | -filing spo | N/A              |                |
|      | 001                   | by line 4 here  | ٦.        |           | Ψ                 | 3.31   | Ψ        |             | 11//             |                |
| 5.   | List                  | all payroll deductions:   |           |           |                   |        |          |             |                  |                |
|      | 5a.                   | Tax, Medicare, and Social Security deductions   | 58        | a.        |                   | 7.05   | \$       |             | N/A              |                |
|      | 5b.                   | Mandatory contributions for retirement plans  | 5b        |           |                   | 0.00   | \$       |             | N/A              |                |
|      | 5c.                   | Voluntary contributions for retirement plans  | 50        |           | ·                 | 0.00   | \$       |             | N/A              |                |
|      | 5d.                   | Required repayments of retirement fund loans  | 50        |           | . — — —           | 0.00   | \$       |             | N/A              |                |
|      | 5e.                   | Insurance   | 56        |           |                   | 0.00   | \$       |             | N/A              |                |
|      | 5f.<br>5g.            | Domestic support obligations Union dues   | 5f        |           |                   | 0.00   | \$       |             | N/A<br>N/A       |                |
|      | 5y.<br>5h.            | Other deductions. Specify:  | 5g<br>5k  | y.<br>1.+ | *                 | 0.00   | + \$     |             | N/A              |                |
| •    |                       |   | _         |           | . —               |        |          |             |                  |                |
| 6.   |                       | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.<br>7   |           |                   | 7.05   | \$<br>\$ |             | N/A              |                |
| 7.   |                       | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.        |           | Ψ <u>2,67</u>     | 8.52   | Φ        |             | N/A              |                |
| 8.   | List<br>8a.           | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 88        | a         | \$                | 0.00   | \$       |             | N/A              |                |
|      | 8b.                   | Interest and dividends  | 8b        |           | *                 | 0.00   | \$-      |             | N/A              |                |
|      | 8c.                   | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  |           |           |                   | 0.00   | \$       |             | N/A              |                |
|      | 8d.                   | Unemployment compensation   | 80        |           | ·                 | 0.00   | \$       |             | N/A              |                |
|      | 8e.                   | Social Security   | 86        |           | · —               | 0.00   | \$       |             | N/A              |                |
|      | 8f.                   | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:         | 8f        |           |                   | 0.00   | \$       |             | N/A              |                |
|      | 8g.                   | Pension or retirement income  | 80        |           | · ·               | 0.00   | \$       |             | N/A              |                |
|      | 8h.                   | Other monthly income. Specify:  | _ 8r<br>_ | Դ.+       | \$                | 0.00   | + \$     |             | N/A              |                |
| 9.   | Add                   | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.        |           | \$                | 0.00   | \$       |             | N/A              | <u> </u>       |
| 10   | Cal                   | culate monthly income. Add line 7 + line 9.   | 10.       | \$        | 2,678.52          | + \$   |          | N/A =       | \$               | 2,678.52       |
| 10.  |                       | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |           | Ψ_        | 2,070.02          | ٠ ا ٢  |          |             | -                | 2,010.02       |
| 11.  | Incli<br>othe<br>Do i | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not acify:       | dep       |           | . ,               |        |          | chedule J   |                  | 0.00           |
| 12.  |                       | If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies   |           |           |                   |        |          | 12.         | <b>.</b>         | 2,678.52       |
| 13.  | Do :                  | you expect an increase or decrease within the year after you file this form   | ?         |           |                   |        |          | _           | ombin<br>nonthly | ed<br>/ income |
|      |                       | No. Yes Explain:  |           |           |                   |        |          |             |                  |                |

Official Form 106I Schedule I: Your Income page 2

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| Fill | in this information to identify your case:  |  |   |  |
|------|---|--|---|--|
| Deb  | btor 1 Jaron Henyard  | Che  | eck if this is:   |  |
|      | btor 2  |  | An amended filing A supplement show 13 expenses as of t | ing postpetition chapter he following date:        |
| Unit | ited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS   |  | MM / DD / YYYY  |  |
|      | se number   |  |   |  |
|      | known)  |  |   |  |
| O    | fficial Form 106J   |  |   |  |
|      | chedule J: Your Expenses  |  |   | 12/15  |
| info | as complete and accurate as possible. If two married people are filir ormation. If more space is needed, attach another sheet to this form. mber (if known). Answer every question. |  |   |  |
| Par  | rt 1: Describe Your Household Is this a joint case?   |  |   |  |
|      | ■ No. Go to line 2.   |  |   |  |
|      | ☐ Yes. Does Debtor 2 live in a separate household?  |  |   |  |
|      | ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for</i> S  | eparate Household of Del                                     | btor 2.   |  |
| 2.   | Do you have dependents? ■ No  |  |   |  |
|      |   | pendent's relationship to<br>btor 1 or Debtor 2              | Dependent's age   | Does dependent live with you?                      |
|      | Do not state the  |  |   | □ No   |
|      | dependents names.   |  |   | ☐ Yes<br>☐ No                                      |
|      |   |  |   | ☐ Yes  |
|      |   |  |   | □ No   |
|      |   |  | _   | ☐ Yes<br>☐ No                                      |
|      |   |  |   | ☐ Yes  |
| 3.   | Do your expenses include No   |  |   |  |
|      | expenses of people other than yourself and your dependents?   |  |   |  |
| Par  | rt 2: Estimate Your Ongoing Monthly Expenses  |  |   |  |
| Est  | timate your expenses as of your bankruptcy filing date unless you ar<br>penses as of a date after the bankruptcy is filed. If this is a suppleme<br>plicable date.                  | e using this form as a s<br>ntal <i>Schedule J</i> , check t | upplement in a Cha<br>the box at the top of             | pter 13 case to report<br>the form and fill in the |
| the  | clude expenses paid for with non-cash government assistance if you evalue of such assistance and have included it on <i>Schedule I: Your I</i>                                      |  | Your expe   | enses  |
| (0)  | inciai i onii 100i.)  |  |   |  |
| 4.   | The rental or home ownership expenses for your residence. Include payments and any rent for the ground or lot.  | e first mortgage 4.  | \$  | 1,170.00   |
|      | If not included in line 4:  |  |   |  |
|      | 4a. Real estate taxes   | 4a.  | ·   | 0.00   |
|      | 4b. Property, homeowner's, or renter's insurance  | 4b.  |   | 0.00   |
|      | Home maintenance, repair, and upkeep expenses     Homeowner's association or condominium dues   | 4c.<br>4d.   | ·   | 0.00   |
| 5.   | Additional mortgage payments for your residence, such as home ed  |  | ·   | 0.00   |

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|   | Case number (i   | f known)  |
|---|--|---|
|   |  |   |
|   | 6a. \$   | 150.00  |
| tion  |  | 0.00  |
|   | · -  | 225.00  |
| ot, sateme, and capie services                      | · -  | 0.00  |
|   |  | 275.00  |
|   | · -  |   |
|   | · ·  | 0.00  |
| _   |  | 20.00   |
| ces   | · -  | 22.00   |
|   | 11. \$   | 50.00   |
| enance, bus or train fare.                          | 12 \$  | 250.00  |
| nowenanore magazines and books                      | · _  |   |
|   | · -  | 0.00  |
| lious donations                                     | 14. \$   | 0.00  |
| from your pay or included in lines 4 or 20          |  |   |
| nom your pay or included in lines 4 of 20.          | 15a ¢  | 0.00  |
|   | · -  |   |
|   | · -  | 0.00  |
|   | · -  | 191.00  |
|   |  | 0.00  |
| ed from your pay or included in lines 4 or 2        |  |   |
|   | 16. \$   | 0.00  |
|   | 47- 6  | 0.00  |
|   | · -  | 0.00  |
|   | · -  | 0.00  |
|   |  | 0.00  |
|   |  | 0.00  |
|   |  | 0.00  |
|   | 1001).   |   |
| port others who do not live with you.               | · -  | 0.00  |
|   |  |   |
| included in lines 4 or 5 of this form or o          |  |   |
|   | · -  | 0.00  |
|   | 20b. \$  | 0.00  |
|   | 20c. \$  | 0.00  |
| eep expenses  | 20d. \$  | 0.00  |
| condominium dues                                    | 20e. \$  | 0.00  |
|   | 21. +\$  | 0.00  |
|   |  |   |
|   |  |   |
|   |  |   |
| es for Debtor 2), if any, from Official Form 1      | 06J-2   \$   |   |
| ult is your monthly expenses.                       | \$   | 2,353.00  |
|   |  |   |
|   |  |   |
| ,   | · -  | 2,678.52  |
| from line 22c above.                                | 23b\$  | 2,353.00  |
|   |  |   |
|   | 220 €  | 325.52  |
| t income.   | ۷۵۵. 🏺   | J2J.J2  |
|   |  |   |
| was in value average with in the con-               | aftan wan fila thia fam  | <b>~2</b>   |
| rease in your expenses within the year              |  |   |
| ing for your car loan within the year or do you exp |  |   |
|   |  |   |
|   | enance, and support that you did not rel, Schedule I, Your Income (Official Form port others who do not live with you.  included in lines 4 or 5 of this form or other's insurance eep expenses condominium dues | et, satellite, and cable services  6c. \$ 6d. \$ 7. \$ 8n costs 8. \$ 10. \$ 11. \$ 11. \$ 11. \$ 11. \$ 12. \$ 13. \$ 13. \$ 15b. \$ 15c. \$ 15d. \$ 17a. \$ 17b. \$ 17b. \$ 17c. \$ 17c. \$ 17d. \$ |

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| Fill in this inforr | mation to identify your  | case:                     |                              |   |     |  |  |  |  |
|---------------------|--|---------------------------|------------------------------|---|-----|--|--|--|--|
| Debtor 1            | Jaron Henyard  |                           |                              |   |     |  |  |  |  |
|                     | First Name   | Middle Name               | Last Name                    |   |     |  |  |  |  |
| Debtor 2            | E: AN  | ACCUMANA                  |                              |   |     |  |  |  |  |
| (Spouse if, filing) | First Name   | Middle Name               | Last Name                    |   |     |  |  |  |  |
| United States Ba    | nkruptcy Court for the:  | NORTHERN DISTRICT         | OF ILLINOIS                  |   |     |  |  |  |  |
| Case number         |  |                           |                              |   |     |  |  |  |  |
| (if known)          |  |                           |                              | ☐ Check if this is an   |     |  |  |  |  |
|                     |  |                           |                              | amended filing  |     |  |  |  |  |
|                     |  |                           |                              |   |     |  |  |  |  |
|                     |  |                           |                              |   |     |  |  |  |  |
| Official Forn       | <u>n 106Dec</u>  |                           |                              |   |     |  |  |  |  |
| Declarat            | ion About a  | ın Individual             | <b>Debtor's Sch</b>          | nedules 12  | /15 |  |  |  |  |
|                     |  |                           |                              |   |     |  |  |  |  |
| f two married pe    | ople are filing togethe  | r, both are equally respo | nsible for supplying corre   | ect information.  |     |  |  |  |  |
| Var. must file this | a farm whanavar van fi   | la hankuuntav aahadula    | a ar amandad aabadulaa I     | Making a falsa atatamant sanasaling property are  | _   |  |  |  |  |
|                     |  |                           |                              | Making a false statement, concealing property, or<br>fines up to \$250,000, or imprisonment for up to 2 |     |  |  |  |  |
|                     | 8 U.S.C. §§ 152, 1341, 1   |                           | araptoy sace san result in   | inios up to 4200,000, or imprisormicity to up to 2  |     |  |  |  |  |
|                     |  |                           |                              |   |     |  |  |  |  |
|                     |  |                           |                              |   |     |  |  |  |  |
| Sigr                | n Below  |                           |                              |   |     |  |  |  |  |
| Did you pay         | y or agree to hay some   | one who is NOT an atto    | rney to help you fill out ba | nkruntey forms?   |     |  |  |  |  |
| Did you pay         | y or agree to pay some   | one who is NOT all allo   | mey to help you mi out ba    | inklupicy forms:  |     |  |  |  |  |
| ■ No                |  |                           |                              |   |     |  |  |  |  |
| ☐ Yes. N            | Name of person   |                           |                              | Attach Bankruptcy Petition Preparer's Notice  | e.  |  |  |  |  |
|                     |  |                           |                              | Declaration, and Signature (Official Form 11  |     |  |  |  |  |
|                     |  |                           |                              |   |     |  |  |  |  |
| Under nenal         | Ity of perjury I declare   | that I have read the sum  | mary and schedules filed     | with this declaration and   |     |  |  |  |  |
|                     | Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. |                           |                              |   |     |  |  |  |  |
| X /s/ lard          | on Henyard   |                           | X                            |   |     |  |  |  |  |
|                     | Henyard  |                           | Signature of D               | Debtor 2  |     |  |  |  |  |
|                     | re of Debtor 1   |                           | - 3                          |   |     |  |  |  |  |
| Date                | 2-1-140 0042   |                           | Data                         |   |     |  |  |  |  |
| Date <u>(</u>       | October 12, 2016   |                           | Date                         |   |     |  |  |  |  |

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|                   | I in this is   | ation to bloom                               |   |            |                               |  |                                    |
|-------------------|--|--|---|------------|-------------------------------|--|------------------------------------|
|                   |  | ation to identify your                       | case:   |            |                               |  |                                    |
| De                | ebtor 1  | Jaron Henyard First Name                     | Middle Name   |            | Last Name                     |  |                                    |
|                   | ebtor 2  |  |   |            |                               |  |                                    |
| (Sp               | ouse if, filing)   | First Name                                   | Middle Name   |            | Last Name                     |  |                                    |
| Un                | ited States Ban  | kruptcy Court for the:                       | NORTHERN DISTRICT   | OF ILL     | INOIS                         |  |                                    |
|                   | ase number   |  |   |            |                               | _  | heck if this is an mended filing   |
| St                |  | of Financial                                 | Affairs for Indiv   |            |                               |  | 4/16                               |
| info<br>nur       | ormation. If months in the mon | ore space is needed,<br>). Answer every ques | attach a separate sheet t<br>tion.  | o this fo  | orm. On the top of any        | equally responsible for sup<br>y additional pages, write you   |                                    |
| Pa                | <u> </u>   |  | rital Status and Where Yo   | ou Lived   | I Before                      |  |                                    |
| 1.                | What is your   | current marital statu                        | s?  |            |                               |  |                                    |
|                   | <ul><li>☐ Married</li><li>■ Not marr</li></ul>   | ied  |   |            |                               |  |                                    |
| 2.                | During the la  | st 3 years, have you                         | lived anywhere other tha  | n where    | vou live now?                 |  |                                    |
|                   | _  | ,  |   |            | ,                             |  |                                    |
|                   | ■ No   | all of the places you li                     | yed in the last 2 years. Do   | not inclu  | ida whara yau liya naw        | ,  |                                    |
|                   | Li Yes. List   | all of the places you if                     | ved in the last 3 years. Do   | not incit  | ide where you live now        |  |                                    |
|                   | Debtor 1 Pri   | or Address:                                  | Dates Debtor lived there  | 1          | Debtor 2 Prior Ad             | dress:   | Dates Debtor 2<br>lived there      |
| <b>3.</b><br>stat |  |  |   |            |                               | ity property state or territory<br>co, Texas, Washington and W |                                    |
|                   | ■ No   |  |   |            |                               |  |                                    |
|                   | ☐ Yes. Mal   | ke sure you fill out <i>Sch</i>              | edule H: Your Codebtors (   | Official F | Form 106H).                   |  |                                    |
| Pa                | rt 2 Explain   | the Sources of You                           | rIncome   |            |                               |  |                                    |
| 4.                | Fill in the total  | amount of income you                         | nployment or from operat<br>u received from all jobs and<br>have income that you rece | d all busi | nesses, including part        |  | ndar years?                        |
|                   | □ No   |  |   |            |                               |  |                                    |
|                   | Yes. Fill  | in the details.                              |   |            |                               |  |                                    |
|                   |  |  | Debtor 1  |            |                               | Debtor 2   |                                    |
|                   |  |  | Sources of income   | Gro        | oss income                    | Sources of income  | Gross income                       |
|                   |  |  | Check all that apply.   | (be        | fore deductions and clusions) | Check all that apply.  | (before deductions and exclusions) |
|                   |  | of current year until<br>I for bankruptcy:   | ■ Wages, commissions, bonuses, tips   |            | \$50,000.00                   | ☐ Wages, commissions, bonuses, tips                            |                                    |
|                   |  |  | ☐ Operating a business  |            |                               | ☐ Operating a business   |                                    |

Official Form 107

Debtor 1 Jaron Henyard Document Page 31 of 50
Case number (if known)

|          |   |                                     |   | <b>5</b> 14 4  |   | <b>5</b> 17 -   |                          |   |
|----------|---|-------------------------------------|---|--|---|---|--------------------------|---|
|          |   |                                     |   | Debtor 1   |   | Debtor 2  |                          |   |
|          |   |                                     |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)   | Sources of inco   |                          | Gross income<br>(before deductions<br>and exclusions) |
|          | For last calendar year:<br>(January 1 to December 31, 2015) |                                     | ■ Wages, commissions, bonuses, tips   |  |   | nissions,   |                          |   |
|          |   |                                     |   | ☐ Operating a business   |   | ☐ Operating a b   | ousiness                 |   |
|          |   | dar year be<br>December             |   | ■ Wages, commissions, bonuses, tips  | \$65,000.00   | ☐ Wages, comr<br>bonuses, tips  | nissions,                |   |
|          |   |                                     |   | ☐ Operating a business   |   | ☐ Operating a b   | ousiness                 |   |
| ar<br>wi | nd other<br>innings.<br>st each s                           | public benef<br>If you are fili     | it payments;<br>ng a joint cas<br>he gross inco   | er that income is taxable. Exa<br>pensions; rental income; intere<br>e and you have income that y<br>me from each source separat   | est; dividends; money collect<br>rou received together, list it or  | ed from lawsuits; r<br>nly once under Del   | oyalties; and<br>btor 1. |   |
|          |   |                                     |   | Debtor 1   |   | Debtor 2  |                          |   |
|          |   |                                     |   | Sources of income Describe below.  | Gross income from each source (before deductions and exclusions)  | Sources of inco   | ome                      | Gross income<br>(before deductions<br>and exclusions) |
| Part 3   | List  | Certain Pa                          | yments You  | Made Before You Filed for E  | ŕ   |   |                          |   |
| 6. A∣    | _   | Neither Deindividual puring the No. | ebtor 1 nor D<br>primarily for a<br>90 days befor<br>Go to line 7<br>List below e<br>paid that cri<br>not include | es debts primarily consumer ebtor 2 has primarily consumer personal, family, or household re you filed for bankruptcy, did a cach creditor to whom you paid editor. Do not include paymen payments to an attorney for the on 4/01/19 and every 3 years | Imer debts. Consumer debts d purpose."  d you pay any creditor a total d a total of \$6,425* or more ints for domestic support obligations bankruptcy case. | of \$6,425* or more of the oreast of the orea | e?<br>ments and the      | ne total amount you<br>nd alimony. Also, do           |
|          | Yes.  |                                     |   | r both have primarily consure you filed for bankruptcy, did  |   | of \$600 or more?   |                          |   |
|          |   | ■ No.                               | Go to line 7  |  |   |   |                          |   |
|          |   | ☐ Yes                               | List below e  | each creditor to whom you paid<br>ments for domestic support of<br>this bankruptcy case.   |   |   |                          |   |
|          | `reditor'   | s Namo and                          | l Addrass   | Dates of navme   | nt Total amount   | Amount you  | Was this r               | navment for   |

paid

still owe

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Case number (if known) Debtor 1 Jaron Henyard

| 7.  | Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.    | rtners; relatives of any gen<br>control, or owner of 20% o | eral partners; partner<br>r more of their voting | erships of which yo<br>g securities; and ar | u are a gener<br>ny managing a | al partner; corporations<br>agent, including one for |  |
|-----|---|--|--|---|--------------------------------|--|--|
|     | ☐ Yes. List all payments to an insider.   |  |  |   |                                |  |  |
|     | Insider's Name and Address  | Dates of payment   | Total amount paid                                | Amount you still owe                        | Reason for                     | this payment   |  |
| 8.  | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos  |  | ments or transfer a                              | ny property on a                            | ccount of a d                  | ebt that benefited an                                |  |
|     | <ul><li>No</li><li>☐ Yes. List all payments to an insider</li></ul>   |  |  |   |                                |  |  |
|     | Insider's Name and Address  | Dates of payment   | Total amount paid                                | Amount you still owe                        | Reason for                     | this payment<br>litor's name                         |  |
| Pai | rt 4: Identify Legal Actions, Repossession  | e and Foreclosures   |  |   |                                |  |  |
| 9.  | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.   | cy, were you a party in an                                 |  |   |                                |  |  |
|     | Case title Case number  | Nature of the case   | Court or agency                                  |   | Status of th                   | ne case  |  |
| 10. | Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.   |  | erty repossessed, f                              | oreclosed, garnis                           | hed, attache                   | d, seized, or levied?                                |  |
|     | Creditor Name and Address   | Describe the Property                                      |  | Date  |                                | Value of the property                                |  |
|     |   | Explain what happened                                      | i  |   |                                |  |  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.  | ause you owed a debt?                                      |  |   |                                |  |  |
|     | Creditor Name and Address   | Describe the action the                                    | creditor took                                    | taken                                       | action was                     | Amount   |  |
| 12. | 2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes |  |  |   |                                |  |  |
| Pai | List Certain Gifts and Contributions  |  |  |   |                                |  |  |
| 13. | Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.   | tcy, did you give any gift                                 | s with a total value                             | of more than \$60                           | 0 per person                   | ?  |  |
|     | Gifts with a total value of more than \$600 per person  | Describe the gifts   |  | Dates<br>the gi                             | s you gave<br>ifts             | Value  |  |
|     | Person to Whom You Gave the Gift and Address:   |  |  |   |                                |  |  |

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| Dek | btor 1 Jaron Henyard   |  | Document Page 33 of 50 Case number   |   | Jiviaiii                 |
|-----|--|--|--|---|--------------------------|
| 14. | Within 2 years before you fil ■ No □ Yes. Fill in the details for                                      |  | did you give any gifts or contributions with a tot   | tal value of more than                  | \$600 to any charity?    |
|     | Gifts or contributions to ch<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, St | arities that total   | Describe what you contributed  | Dates you<br>contributed                | Value                    |
| Par | rt 6: List Certain Losses  |  |  |   |                          |
| 15. | Within 1 year before you file or gambling?  No Yes. Fill in the details.                               | d for bankruptcy o   | r since you filed for bankruptcy, did you lose any   | ything because of the                   | ft, fire, other disaster |
|     | Describe the property you I how the loss occurred  | ribe any insurance coverage for the loss le the amount that insurance has paid. List pending unce claims on line 33 of Schedule A/B: Property. | Date of your loss  | Value of property lost                  |                          |
| Par | rt 7: List Certain Payments  | or Transfers   |  |   |                          |
| 16. | consulted about seeking ba   | nkruptcy or prepar   | lid you or anyone else acting on your behalf pay ing a bankruptcy petition? rs, or credit counseling agencies for services require |   | erty to anyone you       |
|     | Yes. Fill in the details.  |  |  |   |                          |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payr                 | nent, if Not You   | Description and value of any property transferred  | Date payment<br>or transfer was<br>made | Amount of payment        |
|     | Swanson & Desai, LLC<br>670 W Hubbard<br>Suite 202<br>Chicago, IL 60654<br>kc@chicagobankruptcya       | attorney.com   | \$360.00 Attorney Fees   | 10/7/2016                               | \$360.00                 |
|     | Access Counseling<br>633 W 5th Street<br>Suite 26001<br>Los Angeles, CA 90071                          |  | 15   | 10/7/2016                               | \$15.00                  |
| 17. |  | ith your creditors   | lid you or anyone else acting on your behalf pay<br>or to make payments to your creditors?<br>sted on line 16.                     | or transfer any prope                   | erty to anyone who       |

No

☐ Yes. Fill in the details.

Description and value of any property transferred Person Who Was Paid Address made

Date payment or transfer was Amount of payment

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Debtor 1 **Jaron Henyard** 

| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. |   |   |                       |   |                               |  |  |  |  |
|-----|---|---|---|-----------------------|---|-------------------------------|--|--|--|--|
|     | ☐ Yes. Fill in the details.   |   |   |                       |   |                               |  |  |  |  |
|     | Person Who Received Transfer<br>Address   | Description and v   |   | payme                 | ibe any property or<br>ents received or debts<br>n exchange | Date transfer was made        |  |  |  |  |
|     | Person's relationship to you  |   |   |                       |   |                               |  |  |  |  |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)   |   |   |                       |   |                               |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |   |                       |   |                               |  |  |  |  |
|     | Name of trust   | Description and v   | n and value of the property transferred |                       |   | Date Transfer was made        |  |  |  |  |
| Pa  | rt 8: List of Certain Financial Accounts, In  | struments. Safe Denosit   | Boxes, and S                            | torage Units          | s   |                               |  |  |  |  |
|     |   |   | ,                                       | Ū                     |   |                               |  |  |  |  |
| 20. | Within 1 year before you filed for bankrupto sold, moved, or transferred?   | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, |   |                       |   |                               |  |  |  |  |
|     | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.   |   |   |                       |   |                               |  |  |  |  |
|     | No Yes. Fill in the details.  |   |   |                       |   |                               |  |  |  |  |
|     | Name of Financial Institution and   | Last 4 digits of  | Type of account or                      |                       | Date account was  | Last balance                  |  |  |  |  |
|     | Address (Number, Street, City, State and ZIP Code)  |   | instrument                              |                       | closed, sold,<br>moved, or<br>transferred                   | before closing or<br>transfer |  |  |  |  |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  |   |   |                       |   |                               |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |   |                       |   |                               |  |  |  |  |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, S<br>State and ZIP Code)   |   |                       | the contents  | Do you still have it?         |  |  |  |  |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?   |   |   |                       |   |                               |  |  |  |  |
|     | ■ No  |   |   |                       |   |                               |  |  |  |  |
|     | Yes. Fill in the details.   |   |   |                       |   |                               |  |  |  |  |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)  | Who else has or h<br>to it?<br>Address (Number, S<br>State and ZIP Code)  |   | Describe              | the contents  | Do you still have it?         |  |  |  |  |
| Po  | rt 9: Identify Property You Hold or Control   | , i   |   |                       |   |                               |  |  |  |  |
| Га  | rt 9: Identify Property You Hold or Control   | Tor Someone Else  |   |                       |   |                               |  |  |  |  |
| 23. | Do you hold or control any property that so for someone.  | omeone else owns? Inclu   | ude any propei                          | rty you borr          | rowed from, are storing t                                   | for, or hold in trust         |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |   |                       |   |                               |  |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the prop<br>(Number, Street, City, S<br>Code)  |   | Describe the property |   | Value                         |  |  |  |  |
| Pa  | rt 10: Give Details About Environmental Info  | ormation  |   |                       |   |                               |  |  |  |  |
|     |   |   |   |                       |   |                               |  |  |  |  |
| −or | the purpose of Part 10, the following definiti  | ons apply:  |   |                       |   |                               |  |  |  |  |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 **Jaron Henyard** 

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

|     | hazardous material, pollutant, contaminant, or similar term.   |  |   |                    |  |  |  |  |  |  |
|-----|--|--|---|--------------------|--|--|--|--|--|--|
| Rep | ort all notices, releases, and proceedings that y  | ou know about, regardless of when  | they occurred.  |                    |  |  |  |  |  |  |
| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?   |  |   |                    |  |  |  |  |  |  |
|     | ■ No   |  |   |                    |  |  |  |  |  |  |
|     | Yes. Fill in the details.  |  |   |                    |  |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it   | Date of notice     |  |  |  |  |  |  |
| 25. | Have you notified any governmental unit of any release of hazardous material?  |  |   |                    |  |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |   |                    |  |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it   | Date of notice     |  |  |  |  |  |  |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  |  |   |                    |  |  |  |  |  |  |
|     | ■ No   |  |   |                    |  |  |  |  |  |  |
|     | Yes. Fill in the details.  | •  | N. c. cal   | <b>6</b>           |  |  |  |  |  |  |
|     | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the case  | Status of the case |  |  |  |  |  |  |
| Par | 11: Give Details About Your Business or Cor  | nnections to Any Business  |   |                    |  |  |  |  |  |  |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   |  |   |                    |  |  |  |  |  |  |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  |  |   |                    |  |  |  |  |  |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |  |   |                    |  |  |  |  |  |  |
|     | ☐ A partner in a partnership   |  |   |                    |  |  |  |  |  |  |
|     |  |  |   |                    |  |  |  |  |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation  |  |   |                    |  |  |  |  |  |  |
|     | ■ No. None of the above applies. Go to Part 12.  |  |   |                    |  |  |  |  |  |  |
|     | Yes. Check all that apply above and fill in the details below for each business.   |  |   |                    |  |  |  |  |  |  |
|     | Business Name De Address   | escribe the nature of the business   | Employer Identification number Do not include Social Security number or ITIN. |                    |  |  |  |  |  |  |
|     |  | ame of accountant or bookkeeper  | _   | iumber of friit.   |  |  |  |  |  |  |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. |  |   |                    |  |  |  |  |  |  |
|     | ■ No   |  |   |                    |  |  |  |  |  |  |
|     | Yes. Fill in the details below.  |  |   |                    |  |  |  |  |  |  |
|     | Name Address (Number, Street, City, State and ZIP Code)  | ate Issued   |   |                    |  |  |  |  |  |  |
| Dar | 442. Sign Bolow  |  |   |                    |  |  |  |  |  |  |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 16-32565 Doc 1 Filed 10/12/16 Entered 10/12/16 14:28:34 Desc Main Page 36 of 50
Case number (if known) Document

Debtor 1 Jaron Henyard

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Ja | aron Henyard           |  |
|--------|------------------------|--|
| Jaron  | n Henyard              | Signature of Debtor 2  |
| Signa  | ture of Debtor 1       |  |
| Date   | October 12, 2016       | Date   |
| Did yo | u attach additional pa | ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| ■ No   |                        |  |
| ☐ Yes  | 5                      |  |
| Did yo | ou pay or agree to pay | someone who is not an attorney to help you fill out bankruptcy forms?                                  |
| ■ No   |                        |  |
| ☐ Yes  | s. Name of Person      | . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).    |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-32565 Doc 1 Filed 10/12/16 Entered 10/12/16 14:28:34 Desc Main Document Page 41 of 50

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court**Northern District of Illinois

| In r | e Jaron Henyard                                    |                  |   |   | Case N              | 0.                     |                     |
|------|--|------------------|---|---|---------------------|------------------------|---------------------|
|      |  |                  |   | Debtor(s)   | Chapte              | r <b>13</b>            |                     |
|      | DISC   | CLO              | SURE OF COMPE   | NSATION OF ATTO   | RNEY FOR            | DEBTOR(S)              |                     |
| 1.   | compensation paid to                               | me wi            | ithin one year before the filin                                   | (b), I certify that I am the attorn<br>ag of the petition in bankruptcy<br>of or in connection with the bar | , or agreed to be p | aid to me, for service |                     |
|      | For legal services                                 | s, I ha          | ve agreed to accept   |   | \$                  | 4,000.00               |                     |
|      |  |                  |   |   |                     | 360.00                 |                     |
|      | Balance Due  |                  |   |   | \$                  | 3,640.00               |                     |
| 2.   | The source of the com                              | npensa           | tion paid to me was:  |   |                     |                        |                     |
|      | Debtor   |                  | Other (specify):  |   |                     |                        |                     |
| 3.   | The source of compen                               | sation           | to be paid to me is:  |   |                     |                        |                     |
|      | Debtor   |                  | Other (specify):  |   |                     |                        |                     |
| 4.   | ■ I have not agreed                                | to sha           | re the above-disclosed comp                                       | ensation with any other person  | unless they are m   | embers and associa     | tes of my law firm. |
|      |  |                  |   | ation with a person or persons were sof the people sharing in the   |                     |                        | my law firm. A      |
| 5.   | In return for the above                            | e-disc           | losed fee, I have agreed to re                                    | ender legal service for all aspec   | ts of the bankrupto | cy case, including:    |                     |
|      | b. Preparation and fil                             | ing of<br>the de | any petition, schedules, state<br>btor at the meeting of creditor | ering advice to the debtor in det<br>ement of affairs and plan which<br>ors and confirmation hearing, and   | may be required;    |                        | bankruptcy;         |
| 6.   | By agreement with the                              | e debte          | or(s), the above-disclosed fee                                    | e does not include the following  | g service:          |                        |                     |
|      |  |                  |   | CERTIFICATION   |                     |                        |                     |
|      | I certify that the foregonal bankruptcy proceeding |                  | s a complete statement of any                                     | y agreement or arrangement for  | payment to me for   | or representation of   | the debtor(s) in    |
|      | October 12, 2016                                   |                  |   | /s/ Joseph F Len  | tner                |                        |                     |
| _    | Date   |                  |   | Joseph F Lentne   | r                   |                        |                     |
|      |  |                  |   | Signature of Attorne Swanson & Desa   |                     |                        |                     |
|      |  |                  |   | 670 W Hubbard   | ,                   |                        |                     |
|      |  |                  |   | Suite 202<br>Chicago, IL 6065   | 4                   |                        |                     |
|      |  |                  |   | 312-666-7882 Fa   | x: 312-666-889      |                        |                     |
|      |  |                  |   | kc@chicagobank  | ruptcyattorney      | .com                   |                     |
|      |  |                  |   | Name of law firm  |                     |                        |                     |

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
    - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
      - Services provided by Debtor's counsel in preparation of the petition and costs associated with the filing of the case make it more efficient for Debtor and the Attorney to enter into and advanced payment retainer. Debtor's counsel reserves the right to refuse to enter into a security retainer due to the up-front costs associated with filing a Chapter 13 Bankruptcy. If any portion of the retainer is not considered earned or required for expenses it will be refunded to the client.
    - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;

- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

| 1. MEDOWAN CEAN OF THE MAIN   |  |
|---|--|
| representing the debtor on all matters arisi  | ebtor in a Chapter 13 case is responsible for ing in the case unless otherwise ordered by the court. attorney will be paid a flat fee of \$ 4000.00  |
| 2. In addition, the debtor will pay the fili \$\frac{360.00}{}.   | ng fee in the case and other expenses of   |
| 3. Before signing this agreement, the atto  | orney received \$ <u>360.00</u>  |
| toward the flat fee, leaving a balance of   | due of \$ 3640.00 ; and \$ 360.00 for expenses,  |
| leaving a balance due of \$\\\ 4000.00  |  |
| attorney may apply to the court for additional application must be accompanied by an ite the time expended, and the identity of the | as extended evidentiary hearings or appeals, the onal compensation for these services. Any such emization of the services rendered, showing the date, attorney performing the services. The debtor must be notified of the right to appear in court to object. |
| Signed:   |  |
| gam Herrord   |  |
| Jaron Henyard   | Joseph Lentner   |
| Debtor(s)   | Attorney for the Debtor(s)   |
| Do not sign this agreement if the amounts   | are blank.   |

### United States Bankruptcy Court Northern District of Illinois

|       |   | 1 (01 1110111 2 1011101 01 11111015       |                             |                  |
|-------|---|---|-----------------------------|------------------|
| In re | Jaron Henyard                             |   | Case No.                    |                  |
|       |   | Debtor(s)                                 | Chapter 13                  |                  |
|       | VI  | ERIFICATION OF CREDITOR M                 | IATRIX                      |                  |
|       |   | Number of                                 | Creditors:                  | 15               |
|       | The above-named Debtor(s (our) knowledge. | ) hereby verifies that the list of credit | tors is true and correct to | o the best of my |
| Date: | October 12, 2016                          | /s/ Jaron Henyard                         |                             |                  |

Andigo Cu 1205 E Algonquin Rd Schaumburg, IL 60196

Arnold Scott Harris P.C. 111 W Jackson Suite 600 Chicago, IL 60604

Capital One 15000 Capital One Dr Richmond, VA 23238

Capital One Po Box 30285 Salt Lake City, UT 84130

Check N Go 16120 State St South Holland, IL 60473

City of Chicago Department of Finance PO Box 88292 Chicago, IL 60680-1292

City of Chicago Department of Revenue 121 N. LaSalle Room 107A Chicago, IL 60602

Fed Loan Sevicing Po Box 60610 Harrisburg, PA 17106

Fed Loan Sevicing Po Box 60610 Harrisburg, PA 17106

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